

## ACCEPTANCE BY HEALTH CARE AGENT (PATIENT ADVOCATE)

1. This designation shall not become effective unless the patient is unable to participate in medical treatment decisions.
2. A Patient Advocate shall not exercise powers concerning the patients care, custody and medical treatment that the patient, if the patient were able to participate in the decision, could not have exercised in his or her own behalf.
3. This designation cannot be used to make a medical treatment decision to withhold or withdraw treatment from a patient who is pregnant that would result in the pregnant patient's death.
4. A Patient Advocate may make a decision to withhold or withdraw treatment which would allow a patient to die only if the patient has expressed in a clear and convincing manner that the Patient Advocate is authorized to make such a decision, and that the patient acknowledges that such a decision could or would allow the patient's death.
5. A Patient Advocate shall not receive compensation for the performance of his or her authority, rights and responsibilities, but a Patient Advocate may be reimbursed for actual and necessary expenses incurred in the performance of his or her authority, rights and responsibilities.
6. A Patient Advocate shall act in accordance with the standards of care applicable to fiduciaries when acting for the patient and shall act consistent with the patients best interests. The known desire of the patient expressed or evidenced while the patient is able to participate in medical treatment decisions are presumed to be in the patient's best interests.
7. A patient may revoke his or her designation of a Patient Advocate at any time and in any manner sufficient to communicate an intent to revoke.
8. A patient Advocate may revoke his or her acceptance to the designation at any time and in any manner sufficient to communicate an intent to revoke.
9. A patient admitted to a healthcare facility or agency has the rights enumerated in Section 20201 of the Public Health Code, Act No. 368 of the Public Acts of 1978, being Section 333.20201 of the Michigan Compiled Laws.
10. A patient may waive his or her right to revoke the patient advocate designation as to the power to make mental health treatment decisions, and if such a waiver is made, his or her ability to revoke as to certain treatment will be delayed for 30 days after the patient communicates his or her intent to revoke. MCL § 700.5507(4).

I understand the above conditions and I accept the designation as Patient Advocate for: \_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Patient Advocate

\_\_\_\_\_  
Name of Patient Advocate

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Successor Patient Advocate

\_\_\_\_\_  
Name of Successor Patient Advocate

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Successor Patient Advocate

\_\_\_\_\_  
Name of Successor Patient Advocate

The state of Michigan requires your health care agent to sign a Patient Advocate Acceptance Form. Your health care agents assigned in Wish 1 of *Five Wishes* must sign this form before they can begin making decisions for you.

This form is not included in *Five Wishes* because you are not required to complete the acceptance form at the same time that you complete your *Five Wishes*.

You are welcome to make copies of this page.